

House of Representatives

General Assembly

File No. 124

January Session, 2015

Substitute House Bill No. 6892

House of Representatives, March 19, 2015

The Committee on Aging reported through REP. SERRA of the 33rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING HOSPITAL TRAINING AND PROCEDURES FOR PATIENTS WITH SUSPECTED DEMENTIA.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective July 1, 2015*) On or after October 1, 2015, the Commissioner of Public Health shall adopt regulations requiring each hospital, as defined in section 19a-490 of the general statutes, to: (1) Include training in the signs and symptoms of dementia as part of

5 regularly provided training to staff members who provide direct care

6 to patients, and (2) to the extent permissible under section 19a-25f of

the general statutes and the Health Insurance Portability and

8 Accountability Act of 1996, P.L. 104-191, as amended from time to

9 time, share with any other state agency that provides services to a

10 patient of the hospital a diagnosis of dementia for any such patient.

This act shall take effect as follows and shall amend the following sections:

Section 1 July 1, 2015 New section

AGE Joint Favorable Subst.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

The bill requires hospitals to train direct care staff in the signs and symptoms of dementia. As this requirement is to be incorporated as part of regular training, no additional costs are anticipated at the John Dempsey Hospital at the University of Connecticut Health Center.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis sHB 6892

AN ACT CONCERNING HOSPITAL TRAINING AND PROCEDURES FOR PATIENTS WITH SUSPECTED DEMENTIA.

SUMMARY:

This bill requires the public health commissioner, on or after October 1, 2015, to adopt regulations requiring hospitals to train direct care staff in the signs and symptoms of dementia, as part of staff training they regularly provide.

Under the bill, the regulations must also require hospitals to share a patient's dementia diagnosis with any other state agency providing services to the patient. (The bill does not specify the process and timeframe for such information sharing.) Hospitals must do so only to the extent allowed by the federal Health Insurance Portability and Accountability Act (HIPAA) and the law governing disclosure of information to the Connecticut Health Information Network (CHIN).

EFFECTIVE DATE: July 1, 2015

BACKGROUND

CHIN

CHIN integrates state health and social services data within and across UConn Health Center and the departments of Public Health, Developmental Services, and Children and Families. Data from other state agencies may be integrated into the network as funding and federal law permit.

State agencies participating in CHIN are prohibited from disclosing personally identifiable information to the network if it would violate federal law, including HIPAA and the 1974 Family Educational Rights and Privacy Act and associated regulations (CGS § 19a-25f).

COMMITTEE ACTION

Aging Committee

Joint Favorable Substitute

Yea 13 Nay 0 (03/05/2015)